PTO/SB/17 (12-04) use through 07/31/2006. OMB 0651-0032

Lader the Paperwork Reduction Act of 1995, no persons are required to re	U.S. Patent and Tradem	ark Office: U.S. DEPARTMENT OF COMMERCE nation unless it displays a valid OMB control number.
		Complete if Known
Effective on 12/8/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/051,282
	Filing Date	January 22, 2002
FEE TRANSMITTAL	First Named Inventor	Felkey, et al.
For FY 2005	Examiner Name	Thein, M.
	Customer No.	25537
Applicant Claims small entity status. See 37 CFR 1.27	Art Unit	3627
TOTAL AMOUNT OF PAYMENT (\$) 910.00	Attorney Docket No.	WMA01001
METHOD OF PAYMENT (check all that apply)		
Check Credit Card Money Order None Other (please identify):		
X Deposit Account Deposit Account Number: 07-2347 Deposit Account Name:		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee		
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments		
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and		
authorization on PTO-2038. FEE CALCULATION		·
1. BASIC FILING, SEARCH, AND EXAMINATION FEES		
FILING FEES SEARCH FEES Small Entity Small Er		ION FEES all Entity
Application Type Fee (\$) Fee (\$) Fee (\$)		Fee (\$) Fees Paid (\$)
Utility 300 150 500 250		100
Design 200 100 100 50		65
Plant 200 100 300 150		80
Reissue 300 150 500 250		300
	0 0	0
2. EXCESS CLAIM FEES	, ,	Small Entity
Fee Description Fee (\$) Fee (\$)		
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25		
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100		
Multiple dependent claims		360 180
Total Claims	<u>d (\$)</u> <u>N</u>	Multiple Dependent Claims
	0.00	Fee (\$) Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20		\$360.00
Indep. Claims		
10 - 11 = 0 x \$200.00 = \$ HP = highest number of independent claims paid for, if greater than 3	0.00	
- · · · · · · · · · · · · · · · · · · ·		
3. APPLICATION SIZE FEE If the application and dequipes exceed 100 sheets of paper, the applications are described in the second secon	ication size fee due is \$	250 (\$125 for small entity)
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).		
	ional 50 or fraction thereo	
	d up to a whole number)	x \$250.00 = \$ 0.00
4. OTHER FEE(S) Fees Paid(\$)		
Non-English Specification, \$130 fee (no small entity discount)		
Other: RCE fee		\$790.00
One Month Extension Fee		\$120.00
SUBMITTED BY		
Signature Registratio		Telephone (703) 425-8508
Name (Print/Type) Phouphanomketh Ditthavong		Date May 1, 2006